

CEDAR LAKE HEALTH CARE CENTER
5595 HWY ZWEST BEND 53095 Phone:(262) 306-2100
Operated from 1/1 To 12/31 Days of Operation: 366
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/04): 229
Total Licensed Bed Capacity (12/31/04): 229
Number of Residents on 12/31/04: 216Ownership: Nonprofit Church
Highest Level License: Skilled
Operate in Conjunction with CBRF? Yes
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 220

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)		%	
		Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		37.0	
Home Health Care	No	-----	-----	-----	-----	1 - 4 Years		33.3	
Supp. Home Care-Personal Care	No	Developmental Disabilities	0.0	Under 65	3.2	More Than 4 Years		29.6	
Supp. Home Care-Household Services	No	Mental Illness (Org./Psy)	33.8	65 - 74	5.6			-----	
Day Services	No	Mental Illness (Other)	3.7	75 - 84	35.6			100.0	
Respite Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	46.8	*****			
Adult Day Care	No	Para-, Quadra-, Hemiplegic	0.5	95 & Over	8.8	Full-Time Equivalent			
Adult Day Health Care	No	Cancer	2.3		-----	Nursing Staff per 100 Residents			
Congregate Meals	No	Fractures	11.1		100.0	(12/31/04)			
Home Delivered Meals	No	Cardiovascular	6.5	65 & Over	96.8	-----			
Other Meals	No	Cerebrovascular	15.3		-----	RNs		15.0	
Transportation	No	Diabetes	1.4	Gender	%	LPNs		11.0	
Referral Service	No	Respiratory	2.3		-----	Nursing Assistants,			
Other Services	No	Other Medical Conditions	23.1	Male	26.4	Aides, & Orderlies			
Provide Day Programming for				Female	73.6				
Mentally Ill	No	-----	-----		-----				
Provide Day Programming for			100.0		-----				
Developmentally Disabled	No				100.0				

Method of Reimbursement

		Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care				
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All	
Int. Skilled Care	0	0.0	0	8	6.2	261	0	0.0	0	0	0.0	0	0	0.0	0	2	100.0	425	10	4.6	
Skilled Care	18	100.0	265	118	90.8	223	0	0.0	0	64	97.0	218	0	0.0	0	0	0.0	0	200	92.6	
Intermediate	---	---	---	4	3.1	189	0	0.0	0	2	3.0	207	0	0.0	0	0	0.0	0	6	2.8	
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Total	18	100.0		130	100.0		0	0.0		66	100.0		0	0.0		2	100.0		216	100.0	

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04				

Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
		Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/No Home Health	3.6	Bathing	1.4	75.0	23.6	216
Private Home/With Home Health	3.0	Dressing	2.3	79.6	18.1	216
Other Nursing Homes	1.5	Transferring	13.4	66.7	19.9	216
Acute Care Hospitals	83.9	Toilet Use	6.0	71.8	22.2	216
Psych. Hosp.-MR/DD Facilities	0.0	Eating	60.2	34.7	5.1	216
Rehabilitation Hospitals	2.1	*****				
Other Locations	5.8					
Total Number of Admissions	329	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	6.5	Receiving Respiratory Care	7.9	
Private Home/No Home Health	14.7	Occ/Freq. Incontinent of Bladder	57.9	Receiving Tracheostomy Care	0.5	
Private Home/With Home Health	23.7	Occ/Freq. Incontinent of Bowel	40.3	Receiving Suctioning	0.0	
Other Nursing Homes	0.9			Receiving Ostomy Care	4.2	
Acute Care Hospitals	9.6	Mobility		Receiving Tube Feeding	1.4	
Psych. Hosp.-MR/DD Facilities	0.6	Physically Restrained	1.4	Receiving Mechanically Altered Diets	67.6	
Rehabilitation Hospitals	0.0					
Other Locations	17.1	Skin Care		Other Resident Characteristics		
Deaths	33.3	With Pressure Sores	3.2	Have Advance Directives	99.1	
Total Number of Discharges		With Rashes	0.5	Medications		
(Including Deaths)	333			Receiving Psychoactive Drugs	67.6	

Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Nonprofit %	Peer Group Ratio	Bed Size: 200+ %	Peer Group Ratio	Licensure: Skilled %	Peer Group Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	96.1	87.4	1.10	88.9	1.08	87.3	1.10	88.8	1.08
Current Residents from In-County	75.0	86.8	0.86	83.3	0.90	85.8	0.87	77.4	0.97
Admissions from In-County, Still Residing	21.3	21.8	0.98	25.0	0.85	20.1	1.06	19.4	1.10
Admissions/Average Daily Census	149.5	159.1	0.94	116.5	1.28	173.5	0.86	146.5	1.02
Discharges/Average Daily Census	151.4	159.6	0.95	119.3	1.27	174.4	0.87	148.0	1.02
Discharges To Private Residence/Average Daily Census	58.2	63.2	0.92	41.9	1.39	70.3	0.83	66.9	0.87
Residents Receiving Skilled Care	97.2	96.1	1.01	95.1	1.02	95.8	1.02	89.9	1.08
Residents Aged 65 and Older	96.8	96.5	1.00	91.8	1.05	90.7	1.07	87.9	1.10
Title 19 (Medicaid) Funded Residents	60.2	50.4	1.20	64.3	0.94	56.7	1.06	66.1	0.91
Private Pay Funded Residents	30.6	33.2	0.92	19.3	1.58	23.3	1.31	20.6	1.49
Developmentally Disabled Residents	0.0	0.5	0.00	0.8	0.00	0.9	0.00	6.0	0.00
Mentally Ill Residents	37.5	33.9	1.10	39.0	0.96	32.5	1.15	33.6	1.12
General Medical Service Residents	23.1	26.1	0.89	21.2	1.09	24.0	0.96	21.1	1.10
Impaired ADL (Mean)	50.6	51.2	0.99	50.4	1.00	51.7	0.98	49.4	1.03
Psychological Problems	67.6	62.3	1.08	56.9	1.19	56.2	1.20	57.7	1.17
Nursing Care Required (Mean)	10.6	7.1	1.51	8.1	1.32	7.7	1.38	7.4	1.43